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Bib Data Sheet

CONFIRMATION NO. 5082

SERIAL NUMBER 10/606,590	FILING DATE 06/26/2003 RULE	CLASS 707	GROUP ART UNIT 2166	ATTORNEY DOCKET NO. MS1-1514US
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APPLICANTS

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** CONTINUING DATA *****
 NO LJA

** FOREIGN APPLICATIONS *****
 NO LJA

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 09/16/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no LJA 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance LJA Verified and Acknowledged Examiner's Signature: [Signature] Initials: LJA	STATE OR COUNTRY WA	SHEETS DRAWING 12	TOTAL CLAIMS 71	INDEPENDENT CLAIMS 9
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TITLE
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FILING FEE RECEIVED 2172	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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